

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>K</i>	1019	06-07-01
RESPONSE FORMALITY REVIEW	<i>Tequest</i>	925	09-13-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	8/28/02
2	✓
3	✓
4	✓
5	✓
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If more than 150 claims or 10 actions  
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